

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL <div style="text-align: center; font-size: 1.2em;">Mooney for Congress</div>			
ADDRESS (number and street) PO Box 1863			
CITY, STATE, and ZIP CODE <div style="display: flex; justify-content: space-between;"> Martinsburg WV 25402 </div>			
2. NAME OF CANDIDATE Alexander Xavier Mooney	3. OFFICE SOUGHT (State and District) House WV 02		4. FEC IDENTIFICATION NUMBER C00506774
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			

A. FULL NAME, MAILING ADDRESS AND ZIP CODE <div style="text-align: center; font-size: 1.2em;">VIKING LEADERSHIP PAC</div> PO BOX 4616 <div style="display: flex; justify-content: space-between;"> SAINT PAUL MN 55101-4616 </div>	Name of Employer <div style="border: 1px solid black; padding: 2px;">Transaction ID : TX9778</div> Occupation	Date (month, day, year) 10/31/2014	Amount <div style="text-align: right;">1000.00</div>
B. FULL NAME, MAILING ADDRESS AND ZIP CODE <div style="text-align: center; font-size: 1.2em;">FAMILY RESEARCH COUNCIL ACTION PAC</div> 801 G STREET N.W. <div style="display: flex; justify-content: space-between;"> WASHINGTON DC 20001-3729 </div>	Name of Employer <div style="border: 1px solid black; padding: 2px;">Transaction ID : TX9779</div> Occupation	Date (month, day, year) 10/31/2014	Amount <div style="text-align: right;">2500.00</div>
C. FULL NAME, MAILING ADDRESS AND ZIP CODE <div style="text-align: center; font-size: 1.2em;">KROGER PAC</div> 1014 VINE ST. <div style="display: flex; justify-content: space-between;"> CINCINNATI OH 45202-1141 </div>	Name of Employer <div style="border: 1px solid black; padding: 2px;">Transaction ID : TX9780</div> Occupation	Date (month, day, year) 10/31/2014	Amount <div style="text-align: right;">1000.00</div>
D. FULL NAME, MAILING ADDRESS AND ZIP CODE <div style="text-align: center; font-size: 1.2em;">FRIENDS OF BILL POSEY</div> 610 SOUTH BLVD. <div style="display: flex; justify-content: space-between;"> TAMPA FL 33606-2693 </div>	Name of Employer <div style="border: 1px solid black; padding: 2px;">Transaction ID : TX9781</div> Occupation	Date (month, day, year) 10/31/2014	Amount <div style="text-align: right;">1000.00</div>
E. FULL NAME, MAILING ADDRESS AND ZIP CODE <div style="text-align: center; font-size: 1.2em;">THE FINANCIAL SERVICES ROUNDTALBE - PAC</div> 600 13TH ST. NW, SUITE 400 <div style="display: flex; justify-content: space-between;"> WASHINGTON DC 20005-3008 </div>	Name of Employer <div style="border: 1px solid black; padding: 2px;">Transaction ID : TX9783</div> Occupation	Date (month, day, year) 10/31/2014	Amount <div style="text-align: right;">2500.00</div>

SIGNATURE (optional) Peter Onoszko <div style="text-align: right;">[Electronically Filed]</div>	DATE 11/01/2014	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
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Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

FEC FORM 6

(Revised 07/2011)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE ALTICOR PAC 7575 FULTON STREET EAST ADA MI 49355-0001	Name of Employer Transaction ID : TX9785 Occupation	Date (month, day, year) 10/31/2014	Amount 2000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE PIONEER PAC 701 8TH STREET, NW, SUITE 500 WASHINGTON DC 20001-3965	Name of Employer Transaction ID : TX9786 Occupation	Date (month, day, year) 10/31/2014	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE GUN OWNERS OF AMERICA POLITICAL VICTORY FUND 8001 FORBES PLACE SUITE 102 SPRINGFIELD VA 22151-2205	Name of Employer Transaction ID : TX9788 Occupation	Date (month, day, year) 10/31/2014	Amount 2500.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE GARY PALMER FOR CONGRESS 1919 OXMOOR RD. #235 HOMEWOOD AL 35209-3502	Name of Employer Transaction ID : TX9789 Occupation	Date (month, day, year) 10/31/2014	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE HUIZENGA FOR CONGRESS P.O. BOX 254 ZEELAND MI 49464-0254	Name of Employer Transaction ID : TX9790 Occupation	Date (month, day, year) 10/31/2014	Amount 2000.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE WINNOVEMBER PAC 1345 SOUTH CAPITOL ST. SW #1004 WASHINGTON DC 20003-3593	Name of Employer Transaction ID : TX9791 Occupation	Date (month, day, year) 10/31/2014	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE DELOITTE FEDERAL PAC P.O. BOX 365 WASHINGTON DC 20044-0365	Name of Employer Transaction ID : TX9792 Occupation	Date (month, day, year) 10/31/2014	Amount 2500.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE JOYCE M. ANDREWS 1608 FARRAGUT AVE. ROCKVILLE MD 20851-1439	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Transaction ID : TX9784 Occupation INFORMATION REQUESTED PER BI	Date (month, day, year) 10/31/2014	Amount 1000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE KIMBERLY BELLISSIMO 1155 15TH ST. NW, SUITE 410 WASHINGTON DC 20005-2748	Name of Employer BASE CONNECT Transaction ID : TX9787 Occupation MARKETING EXECUTIVE	Date (month, day, year) 10/31/2014	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE DONALD L. BRAGUNIER 12315 COUNTRY VIEW DR. CLEAR SPRING MD 21722-1612	Name of Employer BRAGUNIER MASONRY Transaction ID : TX9782 Occupation OWNER	Date (month, day, year) 10/31/2014	Amount 1000.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE GREG ELLIOT 240 CAPITOL STREET SUITE 500 CHARLESTON WV 25301-2297	Name of Employer AMFM LLC Transaction ID : TX9795 Occupation OWNER	Date (month, day, year) 10/31/2014	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount